NEILLSVILLE MEMORIAL HOME

216 SUNSET PLACE

Operated from 1/1 To 12/31 Days of Operation: 365 Operate in Conjunction with Hospital? Yes Operate in Conjunction with CBRF? No Number of Beds Set Up and Staffed (12/31/05): 114 Total Licensed Bed Capacity (12/31/05): 114 Title 19 (Medicare) Certified? Yes Number of Residents on 12/31/05: 90 Average Daily Census: 90	NEILLSVILLE 54456	Phone: (715) 743-3101		Ownership:	Non-Profit Corporation
Number of Beds Set Up and Staffed (12/31/05): 114 Title 18 (Medicare) Certified? Yes Total Licensed Bed Capacity (12/31/05): 114 Title 19 (Medicaid) Certified? Yes	Operated from 1/1 To 12/3	1 Days of Operation:	365	Highest Level License:	Skilled
Total Licensed Bed Capacity (12/31/05): 114 Title 19 (Medicaid) Certified? Yes	Operate in Conjunction with	Hospital?	Yes	Operate in Conjunction with CBRF?	No
	Number of Beds Set Up and S	taffed (12/31/05):	114	Title 18 (Medicare) Certified?	Yes
Number of Residents on 12/31/05: 90 Average Daily Census: 90	Total Licensed Bed Capacity	(12/31/05):	114	Title 19 (Medicaid) Certified?	Yes
	Number of Residents on 12/3	1/05:	90	Average Daily Census:	90

Age, Gender, and Primary Diagnosis	Length of Stay (12/31/05)				
Primary Diagnosis	*	Age Groups	*	Less Than 1 Year	36.7
Developmental Disabilities	1.1	 Under 65	3.3	1 - 4 Years More Than 4 Years	40.0 23.3
Mental Illness (Org./Psy)	16.7	65 - 74	10.0	More illali 4 fears	23.3
Mental Illness (Other)	1.1	75 - 84	18.9	[100.0
Alcohol & Other Drug Abuse	0.0	85 - 94	51.1	 	
Para-, Quadra-, Hemiplegic	1.1	95 & Over	16.7	Full-Time Equivalent	
Cancer	3.3			Nursing Staff per 100 Resid	lents
Fractures	0.0		100.0	(12/31/05)	
Cardiovascular	35.6	65 & Over	96.7		
Cerebrovascular	21.1			RNs	9.2
Diabetes	8.9	Gender	8	LPNs	11.5
Respiratory	8.9			Nursing Assistants,	
Other Medical Conditions	2.2	Male	27.8	Aides, & Orderlies	55.9
		Female	72.2		
	100.0				
			100.0		

Method of Reimbursement

		Medicare Title 18			edicaid itle 19			Other			Private Pay	2		amily Care			anaged Care			
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	
Int. Skilled Care	0	0.0	0	7	10.4	136	0	0.0	0	1	5.9	169	0	0.0	0	0	0.0	0	8	8.9
Skilled Care	6	100.0	241	56	83.6	116	0	0.0	0	16	94.1	157	0	0.0	0	0	0.0	0	78	86.7
Intermediate				4	6.0	96	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	4	4.4
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Depender	nt 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	6	100.0		67	100.0		0	0.0		17	100.0		0	0.0		0	0.0		90	100.0

Admissions, Discharges, and		Percent Distribution	of Residents'	Condit	ions, Services, an	d Activities as of 12/	31/05
Deaths During Reporting Period							
					% Needing		Total
Percent Admissions from:		Activities of			sistance of		Number of
Private Home/No Home Health		Daily Living (ADL)	Independent	One	Or Two Staff	Dependent	Residents
Private Home/With Home Health	0.0	Bathing	0.0		74.4	25.6	90
Other Nursing Homes	1.9	Dressing	15.6		64.4	20.0	90
Acute Care Hospitals	85.9	Transferring	22.2		61.1	16.7	90
Psych. HospMR/DD Facilities	0.6	Toilet Use	21.1		53.3	25.6	90
Rehabilitation Hospitals	0.0	Eating	81.1		7.8	11.1	90
Other Locations	0.0	*******	******	*****	******	******	******
Total Number of Admissions	156	Continence		%	Special Treatmen	ts	%
Percent Discharges To:		Indwelling Or Extern	al Catheter	8.9	Receiving Resp	iratory Care	5.6
Private Home/No Home Health	41.8	Occ/Freq. Incontinen	t of Bladder	35.6	Receiving Trac	heostomy Care	0.0
Private Home/With Home Health	9.5	Occ/Freq. Incontinen	t of Bowel	21.1	Receiving Suct	ioning	0.0
Other Nursing Homes	8.2				Receiving Osto	my Care	0.0
Acute Care Hospitals	3.8	Mobility			Receiving Tube	Feeding	4.4
Psych. HospMR/DD Facilities	0.0	Physically Restraine	d	5.6	Receiving Mech	anically Altered Diets	80.0
Rehabilitation Hospitals	0.0					_	
Other Locations	0.6	Skin Care			Other Resident C	haracteristics	
Deaths	27.8	With Pressure Sores		4.4	Have Advance D	irectives	97.8
Total Number of Discharges		With Rashes		0.0	Medications		
(Including Deaths)	158				Receiving Psyc	hoactive Drugs	42.2

	This	Other	Hospital-	P	11
	Facility	Based Facilities		Faci	lties
	%	%	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	78.9	90.0	0.88	88.1	0.90
Current Residents from In-County	80.0	84.8	0.94	77.6	1.03
Admissions from In-County, Still Residing	14.7	14.1	1.05	18.1	0.81
Admissions/Average Daily Census	173.3	216.7	0.80	162.3	1.07
Discharges/Average Daily Census	175.6	218.8	0.80	165.1	1.06
Discharges To Private Residence/Average Daily Census	90.0	119.6	0.75	74.8	1.20
Residents Receiving Skilled Care	95.6	97.7	0.98	92.1	1.04
Residents Aged 65 and Older	96.7	89.6	1.08	88.4	1.09
Title 19 (Medicaid) Funded Residents	74.4	66.3	1.12	65.3	1.14
Private Pay Funded Residents	18.9	20.2	0.93	20.2	0.94
Developmentally Disabled Residents	1.1	1.4	0.82	5.0	0.22
Mentally Ill Residents	17.8	32.3	0.55	32.9	0.54
General Medical Service Residents	2.2	23.2	0.10	22.8	0.10
Impaired ADL (Mean)*	46.2	49.3	0.94	49.2	0.94
Psychological Problems	42.2	58.3	0.72	58.5	0.72
Nursing Care Required (Mean)*	11.8	8.0	1.47	7.4	1.59